

Department of Planning and Budget James B. Cook, Jr., Scholar Program in Public Administration

Application Form

Social Sec	urity No		Date:	Date:			
Name:				Day Phone	e ()_		
		First			_		
Address:				Evening P	hone ()		
-	City	State	Zip				
Educatio	<u>on</u>						
				7 8 9 10 11 12 tion 1 2 3 4		mpleted	
	d Location of titution	Hrs	Degree Received	Major/Spec	Minor	Dates Attended	
1.							
2.							
3.							
type of deg Describe and	ree or program	m and exped	ted completic	n in the near fut ion date: you have had the ng and Budget.	-		
List the con	with us?	cations softw	vare you are	ave had that you			
and rate yo	our familiarity	y on a scale	01 1 - 3 (10W				

Availability	<u>7</u>									
How many hours per week do you plan to participate in the internship program?										
List the mon	ths you will be	available to p	participate in tl	ne internship	program.					
Identify your proposed schedule to work during the internship on the grid below. Mark only those times that you most prefer.										
	Monday	Tuesday	Wednesday	Thursday	Friday					
Morning										
Afternoon										
Applicant's S	signature:	Date:								

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